Case 15-11772-CMG Doc 1 B1 (Official Form 1) (04/13)	Filed 01/31/ Document	15 Enter Page 1 of	red 01/31/15 15:4 f 54	6:30 De	sc Main	
	Bankruptcy Co of New Jersey	ourt		Voluntar	y Petition	
Name of Debtor (if individual, enter Last, First, Middle): Stuckey, Ahmad Qadir	or rew dersey	Name of Joint 1	Debtor (Spouse) (Last, First,	Middle):		
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):  None			es used by the Joint Debtor i d, maiden, and trade names)		S	
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (I (if more than one, state all): 9498	TIN) No./Complete EIN	Last four digits (if more than on	of Soc. Sec. or Individual-Ta	axpayer I.D. (ITI	N) No./Complete EIN	
Street Address of Debtor (No. and Street, City, and State) 195 Oak Street	)	Street Address	of Joint Debtor (No. and Stro	eet, City, and Sta	nte	
Sayreville, NJ	ZIPCODE 08879				ZIPCODE	
County of Residence or of the Principal Place of Business Middlesex		County of Resi	dence or of the Principal Pla	ce of Business:		
Mailing Address of Debtor (if different from street address	s):	Mailing Addres	ss of Joint Debtor (if differen	nt from street add	dress):	
	ZIPCODE				ZIPCODE	
Location of Principal Assets of Business Debtor (if different	ent from street address al	pove):			ZIPCODE	
Type of Debtor (Form of Organization)	Nature of Business (Check one box)		Chapter of Bank	kruptcy Code U is Filed (Check		
(Check one box) Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  Corporation (includes LLC and LLP)	Health Care Business Single Asset Real Es 11 U.S.C. § 101 (51H	tate as defined in	☐ Chapter 7 ☐ Chapter 9 ☐ Chapter 11	Chapter 15 P	etition for of a Foreign	
☐ Partnership ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Stockbroker Commodity Broker Clearing Bank Other N.A.		Chapter 12 Chapter 13	Chapter 15 Pe Recognition of Nonmain Pro	of a Foreign	
Chapter 15 Debtors  Country of debtor's center of main interests:	Tax-Exempt l (Check box, if ap	Entity plicable)		re of Debts ck one box) onsumer	Delte	
Each country in which a foreign proceeding by, regarding, or against debtor is pending:	Debtor is a tax-exer under Title 26 of th Code (the Internal F	debts, defined in 11 U.S.C.  §101(8) as "incurred by an business debts.				
Filing Fee (Check one box)  Full Filing Fee attached		Check o	Chapter 11 D ne box: otor is a small business as de		C 8 101(51D)	
	Estidos Is and a Mark att	☐ Del	otor is not a small business as		. ,	
Filing Fee to be paid in installments (applicable to inc signed application for the court's consideration certify to pay fee except in installments. Rule 1006(b). See	ing that the debtor is una	able Debt	or's aggregate noncontingent liquers or affiliates) are less than \$2, 01/16 and every three years then	490,925 (amount s		
Filing Fee waiver requested (applicable to chapter 7 in attach signed application for the court's consideration		☐ A p	Il applicable boxes clan is being filed with this pot teptances of the plan were so tises of creditors, in accordance	licited prepetitio		
Statistical/Administrative Information		paid, there will be n	no funds available for		THIS SPACE IS FOR COURT USE ONLY	
Estimated Number of Creditors	1,000- 5,001- 5,000 10,000	10,001- 25,000	25,001- 50,001- 50,000 100,000	Over 100,000		
\$50,000 \$100,000 \$500,000 to \$1 to		\$50,000,001 to \$100	\$100,000,001 \$500,000,001 to \$500 to \$1 billion	More than \$1 billion		
Estimated Liabilities		\$50,000,001 to \$100	\$100,000,001 \$500,000,001 to \$500 to \$1 billion million	More than		

	on  apleted and filed in every case)	Page 2 of 54 Name of Debtor(s): Ahmad Qadir Stuckey	
A	ll Prior Bankruptcy Cases Filed Within Last 8 Year		
Location Where Filed:	ONE	Case Number:	Date Filed:
Location Where Filed: N.	А.	Case Number:	Date Filed:
	ankruptcy Case Filed by any Spouse, Partner or Aff	iliate of this Debtor (If more than one, attach	additional sheet)
Name of Debtor: N(	ONE	Case Number:	Date Filed:
District:		Relationship:	Judge:
	Exhibit A	Exhib (To be completed if del	
	ebtor is required to file periodic reports (e.g., forms	whose debts are primar	
	e Securities and Exchange Commission pursuant to he Securities Exchange Act of 1934 and is requesting	I, the attorney for the petitioner named in thave informed the petitioner that [he or should be a shou	e] may proceed under chapter 7, 11, de, and have explained the relief ther certify that I delivered to the
Exhibit A is att	ached and made a part of this petition.	X /s/ Scott R Miller Signature of Attorney for Debtor(s)	01/29/2015 Date
Yes, and Exhib	it C is attached and made a part of this petition.  Exh	ibit D	
(To be completed by	every individual debtor. If a joint petition is filed, each	spouse must complete and attach a separate Exh	nibit D.)
Exhibit D cor	npleted and signed by the debtor is attached and made a	part of this petition.	
If this is a joint petition		ran or and rannon	
3 1	1:	Farrer and between	
_	n: o completed and signed by the joint debtor is attached an		
_	o completed and signed by the joint debtor is attached an <b>Information Rega</b>	nd made a part of this petition.  Arding the Debtor - Venue	
Exhibit D also	o completed and signed by the joint debtor is attached an <b>Information Rega</b>	arding the Debtor - Venue y applicable box) and place of business, or principal assets in this	District for 180 days immediately
Exhibit D also	Information Rega (Check an ebtor has been domiciled or has had a residence, princip	arding the Debtor - Venue y applicable box) oal place of business, or principal assets in this uch 180 days than in any other District.	
Exhibit D also  Exhibit D also  D  D  D  D  D	Information Rega (Check an ebtor has been domiciled or has had a residence, principal receding the date of this petition or for a longer part of s	ard made a part of this petition.  Arding the Debtor - Venue y applicable box) bal place of business, or principal assets in this uch 180 days than in any other District. general partner, or partnership pending in this D ucipal place of business or principal assets in the States but is a defendant in an action or proceed	vistrict. e United Sates in this District, or
Exhibit D also	Information Rega (Check an ebtor has been domiciled or has had a residence, principal receding the date of this petition or for a longer part of substruction is a debtor in a foreign proceeding and has its principal place of business or assets in the United his District, or the interests of the parties will be served in Certification by a Debtor Who Resi	arding the Debtor - Venue y applicable box) pal place of business, or principal assets in this such 180 days than in any other District. The peneral partner, or partnership pending in this Description of business or principal assets in the States but is a defendant in an action or proceed in regard to the relief sought in this District.	e United Sates in this District, or ling [in federal or state court] in
Exhibit D also	Information Rega (Check an ebtor has been domiciled or has had a residence, principal receding the date of this petition or for a longer part of substruction is a debtor in a foreign proceeding and has its principal place of business or assets in the United his District, or the interests of the parties will be served in Certification by a Debtor Who Resi	arding the Debtor - Venue y applicable box) bal place of business, or principal assets in this uch 180 days than in any other District.  general partner, or partnership pending in this D ucipal place of business or principal assets in the States but is a defendant in an action or proceed n regard to the relief sought in this District.  des as a Tenant of Residential Propuplicable boxes)	e United Sates in this District, or ding [in federal or state court] in
Exhibit D also  Exhibit D also  D  D  h  th	Information Rega (Check an ebtor has been domiciled or has had a residence, princip receding the date of this petition or for a longer part of shere is a bankruptcy case concerning debtor's affiliate, go bettor is a debtor in a foreign proceeding and has its princip as no principal place of business or assets in the United his District, or the interests of the parties will be served in Certification by a Debtor Who Resi (Check all apparent) and lord has a judgment against the debtor for possession	arding the Debtor - Venue y applicable box) bal place of business, or principal assets in this uch 180 days than in any other District.  general partner, or partnership pending in this D ucipal place of business or principal assets in the States but is a defendant in an action or proceed n regard to the relief sought in this District.  des as a Tenant of Residential Propuplicable boxes)	e United Sates in this District, or ding [in federal or state court] in
Exhibit D also	Information Rega (Check an ebtor has been domiciled or has had a residence, princip receding the date of this petition or for a longer part of shere is a bankruptcy case concerning debtor's affiliate, go bettor is a debtor in a foreign proceeding and has its princip as no principal place of business or assets in the United his District, or the interests of the parties will be served in Certification by a Debtor Who Resi (Check all apparandlord has a judgment against the debtor for possession (Name of I	arding the Debtor - Venue y applicable box) bal place of business, or principal assets in this uch 180 days than in any other District.  general partner, or partnership pending in this D ucipal place of business or principal assets in the States but is a defendant in an action or proceed n regard to the relief sought in this District.  des as a Tenant of Residential Propulicable boxes) n of debtor's residence. (If box checked, compile	e United Sates in this District, or ding [in federal or state court] in
Exhibit D also  Exhibit D also  D  D  h  th	Information Rega (Check an ebtor has been domiciled or has had a residence, princip receding the date of this petition or for a longer part of shere is a bankruptcy case concerning debtor's affiliate, go bettor is a debtor in a foreign proceeding and has its princip as no principal place of business or assets in the United his District, or the interests of the parties will be served in Certification by a Debtor Who Resi (Check all apparandlord has a judgment against the debtor for possession (Name of I	arding the Debtor - Venue y applicable box) bal place of business, or principal assets in this uch 180 days than in any other District.  general partner, or partnership pending in this D ucipal place of business or principal assets in the States but is a defendant in an action or proceed n regard to the relief sought in this District.  des as a Tenant of Residential Prop uplicable boxes) n of debtor's residence. (If box checked, compil andlord that obtained judgment)  of landlord) there are circumstances under which the debtor	e United Sates in this District, or ding [in federal or state court] in  erty  lete the following.)
Exhibit D also  Exhibit D also  D p T D h tt	Information Rega (Check an rebtor has been domiciled or has had a residence, princip receding the date of this petition or for a longer part of s there is a bankruptcy case concerning debtor's affiliate, g rebtor is a debtor in a foreign proceeding and has its princip as no principal place of business or assets in the United his District, or the interests of the parties will be served in  Certification by a Debtor Who Resi (Check all apparent against the debtor for possession)  (Name of Interests of the parties will be served in the debtor for possession)  (Address of the parties will be served in the debtor for possession)	arding the Debtor - Venue y applicable box) pal place of business, or principal assets in this uch 180 days than in any other District. general partner, or partnership pending in this D acipal place of business or principal assets in the States but is a defendant in an action or proceed are regard to the relief sought in this District.  des as a Tenant of Residential Prop pplicable boxes) and of debtor's residence. (If box checked, compi andlord that obtained judgment)  of landlord) there are circumstances under which the debtor possession, after the judgment for possession v	e United Sates in this District, or ding [in federal or state court] in  erty  lete the following.)  would be permitted to cure the was entered, and

Case 15-11772-CMG Doc 1 Filed 01/31/15 Entered 01/31/15 15:46:30 Desc Main Document Page 3 of 54 **B1 (Official Form 1) (04/13)** Page 3 Name of Debtor(s): Voluntary Petition (This page must be completed and filed in every case) Ahmad Oadir Stuckey **Signatures** Signature(s) of Debtor(s) (Individual/Joint) Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and I declare under penalty of perjury that the information provided in this petition has chosen to file under chapter 7] I am aware that I may proceed under is true and correct, that I am the foreign representative of a debtor in a foreign chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief proceeding, and that I am authorized to file this petition. available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the (Check only **one** box.) petition] I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with chapter 15 of title 11, United States Code. I request relief in accordance with the chapter of title 11, United States Certified copies of the documents required by 11 U.S.C. § 1515 of title 11 are Code, specified in this petition. Pursuant to 11 U.S.C.§ 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached. X /s/ Ahmad Oadir Stuckey Signature of Debtor (Signature of Foreign Representative) Signature of Joint Debtor (Printed Name of Foreign Representative) Telephone Number (If not represented by attorney) 01/29/2015 (Date) Date Signature of Attorney\* **Signature of Non-Attorney Petition Preparer** /s/ Scott R Miller Signature of Attorney for Debtor(s) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, (2) I prepared this document for compensation, SCOTT R MILLER 3701 and have provided the debtor with a copy of this document and the notices and Printed Name of Attorney for Debtor(s) information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) Scott R. Miller, Esq. setting a maximum fee for services chargeable by bankruptcy petition Firm Name preparers, I have given the debtor notice of the maximum amount before any document for filing for a debtor or accepting any fee from the debtor, as 203 Easton Avenue required in that section. Official Form 19 is attached. New Brunswick, NJ 08901 Printed Name and title, if any, of Bankruptcy Petition Preparer 732-249-0404 Telephone Number Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) \*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect. Address Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition. Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above. Signature of Authorized Individual Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual: Printed Name of Authorized Individual If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. Title of Authorized Individual A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or Date

imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

B1 D (Official Form 1, Exhibit D) (12/09)

# UNITED STATES BANKRUPTCY COURT District of New Jersey

In re	Ahmad Qadir Stuckey	Case No.
_	Debtor(s)	(if known)

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.

correct.

B1 D (Official Form 1, Exh. D) (12/09) - Cont. Page 2 □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing. ☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.] ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); Active military duty in a military combat zone. ☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

Signature of Debtor: /s/ Ahmad Qadir Stuckey

AHMAD QADIR STUCKEY

01/29/2015

Date: \_\_\_\_\_\_

I certify under penalty of perjury that the information provided above is true and

**B6** Cover (Form 6 Cover) (12/07)

# FORM 6. SCHEDULES

Summary of Schedules

Statistical Summary of Certain Liabilities and Related Data (28 U.S.C. § 159)

Schedule A - Real Property

Schedule B - Personal Property

Schedule C - Property Claimed as Exempt

Schedule D - Creditors Holding Secured Claims

Schedule E - Creditors Holding Unsecured Priority Claims

Schedule F - Creditors Holding Unsecured Nonpriority Claims

Schedule G - Executory Contracts and Unexpired Leases

Schedule H - Codebtors

Schedule I - Current Income of Individual Debtor(s)

Schedule J - Current Expenditures of Individual Debtor(s)

Unsworn Declaration under Penalty of Perjury

GENERAL INSTRUCTIONS: The first page of the debtor's schedules and the first page of any amendments thereto must contain a caption as in Form 16B. Subsequent pages should be identified with the debtor's name and case number. If the schedules are filed with the petition, the case number should be left blank

Schedules D, E, and F have been designed for the listing of each claim only once. Even when a claim is secured only in part or entitled to priority only in part, it still should be listed only once. A claim which is secured in whole or it part should be listed on Schedule D only, and a claim which is entitled to priority in whole or in part should be listed on Schedule E only. Do not list the same claim twice. If a creditor has more than one claim, such as claims arising from separate transactions, each claim should be scheduled separately.

Review the specific instructions for each schedule before completing the schedule.

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In re	Ahmad Qadir Stuckey	Case No
	Debtor	(If known)

# **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C – Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
195 Oak Street Sayreville, NJ 08879  195 Oak Street Sayreville, NJ 08879  \$240,000 FMV -\$24,000 COS =\$216,000 -\$220,423 First Mortgage =-\$5,023	Fee Simple		240,000.00	220,423.00

3ankruptcy2015 ©1991-2015, New Hope Software, Inc., ver. 5.1.1-872 - Saturday, January 31, 2015, at 15:45:26 - 31008-301X-\*\*\*\* - PDF-XChange 4.0

(Report also on Summary of Schedules.)

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In re	Ahmad Qadir Stuckey	Case No
	Debtor	(If known)

# SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See. 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
Cash on hand.     Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X	Checking Account Wells Fargo Bank		900.00
<ol> <li>Security deposits with public utilities, telephone companies, landlords, and others.</li> <li>Household goods and furnishings, including audio, video, and computer equipment.</li> </ol>	X	Household Furnishings Residence		3,000.00
<ul><li>5. Books. Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.</li><li>6. Wearing apparel.</li></ul>	X	Clothing Residence		500.00
7. Furs and jewelry.		Rings, Watch, Etc. Residence		200.00
8. Firearms and sports, photographic, and other hobby equipment.  9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.  10. Annuities. Itemize and name each issuer.	x x			

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In re	Ahmad Qadir Stuckey	Case No
,	Debtor	(If known)

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(e).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars.	X			
Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each.		Worker's Compensation Claim		Unknown
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. §101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2000 Ford Taurus Residence		1,500.00

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n re	Ahmad Qadir Stuckey	Case No.
	Debtor	(If known)

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

26. Bouts, motors, and accessories.  27. Alteruff and accessories.  28. Office equipment, furnishings, and supplies.  29. Machinery, fixtures, equipment, and supplies succión huntires.  30. Inventory.  31. Animals.  32. Crops - growing or harvested. Give particulars.  33. Farming equipment and implements.  34. Farm supplies, chemicals, and feed.  35. Other personal property of any kind not already listed. Hemize.	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
27. Aircraft and accessories.  28. Office equipment, furnishings, and supplies.  29. Machinery, fixtures, equipment, and supplies  X  29. Machinery, fixtures, equipment, and supplies  X  30. Inventory.  X  31. Animals.  X  32. Crops - growing or harvested. Give particulars.  X  33. Farming equipment and implements.  X  34. Farm supplies, chemicals, and feed.  X  35. Other personal property of any kind not  X	26. Boats, motors, and accessories.	X			
28. Office equipment, furnishings, and supplies.  29. Machinery, fixtures, equipment, and supplies used in business.  30. Inventory.  31. Animals.  32. Crops - growing or harvested. Give particulars.  33. Farming equipment and implements.  34. Farm supplies, chemicals, and feed.  35. Other personal property of any kind not  X  X  X  X  X  X  X  X  X  X  X  X  X					
used in business.  30. Inventory.  X  31. Animals.  X  32. Crops - growing or harvested. Give particulars.  X  33. Farming equipment and implements.  X  34. Farm supplies, chemicals, and feed.  X  35. Other personal property of any kind not  X	28. Office equipment, furnishings, and supplies.				
31. Animals.  32. Crops - growing or harvested. Give particulars.  33. Farming equipment and implements.  34. Farm supplies, chemicals, and feed.  35. Other personal property of any kind not  X	29. Machinery, fixtures, equipment, and supplies used in business.	X			
32. Crops - growing or harvested. Give particulars.  33. Farming equipment and implements.  34. Farm supplies, chemicals, and feed.  35. Other personal property of any kind not  X	30. Inventory.	X			
particulars.  33. Farming equipment and implements.  34. Farm supplies, chemicals, and feed.  35. Other personal property of any kind not  X	31. Animals.	X			
34. Farm supplies, chemicals, and feed. X 35. Other personal property of any kind not X	32. Crops - growing or harvested. Give particulars.	X			
35. Other personal property of any kind not	33. Farming equipment and implements.	X			
35. Other personal property of any kind not already listed. Itemize.	34. Farm supplies, chemicals, and feed.				
	already listed. Itemize.				

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(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

B

ered 01/31/15 15:46:30 Desc Main of 54

36C (Official Form 6C) (04/13)	DOC T	Filed 01/3	r\TO	
36C (Official Form 6C) (04/13)		Document	Pag	je 11

Case No.	
	(If known)

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under: (Check one box)

**Debtor** 

◩	11 U.S.C. § 522(b)(2)
	11 U.S.C. § 522(b)(3)

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In re Ahmad Qadir Stuckey

☐ Check if debtor claims a homestead exemption that exceeds \$155,675\*.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Clothing	11 U.S.C. 522(d)(3)	500.00	500.00
Household Furnishings	11 U.S.C. 522(d)(3)	3,000.00	3,000.00
Checking Account	11 U.S.C. 522(d)(5)	300.00	900.00
195 Oak Street Sayreville, NJ 08879	11 U.S.C. 522(d)(1)	19,277.00	240,000.00
2000 Ford Taurus	11 U.S.C. 522(d)(2)	1,500.00	1,500.00
Rings, Watch, Etc.	11 U.S.C. 522(d)(4)	200.00	200.00

<sup>\*</sup>Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6D (Official Form 6D) (12/07)

Debtor

In re	Ahmad Qadir Stuckey	,	Case No.	

# SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C \$112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 1120868844			Lien: First Mortgage					
CITIMORTGAGE INC PO BOX 9438 GAITHERSBURG, MD 20898			Security: 195 Oak Street				220,423.00	0.00
			VALUE \$ 240,000.00	1				
ACCOUNT NO.			VALUE \$					
ACCOUNT NO.			VALUE \$					
0 continuation sheets attached			(Total c	Sub	tota	1≫	\$ 220,423.00	\$ 0.00
			(Total (	n till	rota	ige).	\$ 220,423.00	\$ 0.00

(Report also on (If applicable, rep Summary of Schedules) also on Statistical

(Use only on last page)

(If known)

(If applicable, report s) also on Statistical Summary of Certain Liabilities and Related Data.) Case 15-11772-CMG Doc 1 Filed 01/31/15 Entered 01/31/15 15:46:30 Desc Main Document Page 13 of 54

**B6E (Official Form 6E) (04/13)** 

(		
In re Ahmad Qadir Stuckey	, Case No.	
Debtor	(if known)	
SCHEDULE E - CREDITORS HOL	LDING UNSECURED PRIORITY CLAIMS	
unsecured claims entitled to priority should be listed in this sched address, including zip code, and last four digits of the account nur	ly by type of priority, is to be set forth on the sheets provided. Only holders of ule. In the boxes provided on the attached sheets, state the name, mailing mber, if any, of all entities holding priority claims against the debtor or the Use a separate continuation sheet for each type of priority and label each with	
	as with the creditor is useful to the trustee and the creditor and may be provided e child's initials and the name and address of the child's parent or guardian, such child's name. See 11 U.S.C. § 112 and Fed.R.Bankr.P. 1007(m).	
entity on the appropriate schedule of creditors, and complete Scheboth of them or the marital community may be liable on each clai Joint, or Community." If the claim is contingent, place an "X" in t	Intly liable on a claim, place an "X" in the column labeled "Codebtor," include the dule H-Codebtors. If a joint petition is filed, state whether husband, wife, m by placing an "H,""W,""J," or "C" in the column labeled "Husband, Wife, the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Disputed." (You may need to place an "X" in	ne
	abeled "Subtotals" on each sheet. Report the total of all claims listed on this pleted schedule. Report this total also on the Summary of Schedules.	
	each sheet in the box labeled "Subtotals" on each sheet. Report the total of all beled "Totals" on the last sheet of the completed schedule. Individual debtors ummary of Certain Liabilities and Related Data.	vitl
	I on each sheet in the box labeled "Subtotals" on each sheet. Report the total of ax labeled "Totals" on the last sheet of the completed schedule. Individual debtocal Summary of Certain Liabilities and Related	
Check this box if debtor has no creditors holding unsecured p	priority claims to report on this Schedule E.	
TYPES OF PRIORITY CLAIMS (Check the appropriate box(e	es) below if claims in that category are listed on the attached sheets)	
☐ Domestic Support Obligations		
	by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, nom such a domestic support claim has been assigned to the extent provided in	

# \_\_\_\_ Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

# Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

# Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

<sup>\*</sup>Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6E (Official Form 6E) (04/13) - Cont.	
In re Ahmad Qadir Stuckey	, Case No.
Debtor	(if known)
Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150* per farmer or fishermen	nan, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
Deposits by individuals	
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or re that were not delivered or provided. 11 U.S.C. § 507(a)(7).	ntal of property or services for personal, family, or household use,
☐ Taxes and Certain Other Debts Owed to Governmental Units	
Taxes, customs duties, and penalties owing to federal, state, and local govern	nmental units as set forth in 11 U.S.C. § 507(a)(8).
Commitments to Maintain the Capital of an Insured Depository Instit	ution
Claims based on commitments to the FDIC, RTC, Director of the Office of T. Governors of the Federal Reserve System, or their predecessors or successors, to U.S.C. § 507 (a)(9).	
Claims for Death or Personal Injury While Debtor Was Intoxicated	
Claims for death or personal injury resulting from the operation of a motor valcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).	rehicle or vessel while the debtor was intoxicated from using
* Amounts are subject to adjustment on 4/01/16, and every three years the adjustment.	reafter with respect to cases commenced on or after the date of

\_\_\_\_ continuation sheets attached

# Case 15-11772-CMG B6F (Official Form 6F) (12/07) In re Ahmad Qadir Stuckey

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# SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 020917829637  ALLY FINANCIAL 200 RENAISSANCE CTR DETROIT, MI 48243			Lease Balance Repossessed 12/2014				5,767.00
ACCOUNT NO3499919459211613  AMEX PO BOX 297871 FORT LAUDERDALE, FL 33329							197.00
ACCOUNT NO. 4313072998589355  BK OF AMER P.O. BOX 7047  DOVER, DE 19903							14,010.00
ACCOUNT NO.  Bryan Cowan c/o Law Offices of O'Keke & Associates One Gateway Center, Suite 2600 Newark, NJ 07102	_		Lawsuit 2:11-CV-1149		X	X	0.00
continuation sheets attached	!	!	<u>.</u> S	Subt			\$ 19,974.00
Total ▷ \$						\$	

(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

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		Document	Page 16 of 54	

B6F (Official Form 6F) (12/07) - Cont.

In re	Ahmad Qadir Stuckey	<b></b> ,	Case No.		
	Debtor			(If known)	

# SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 5178057308234702			Judgment VJ-009998-14/Wage Garnishment				
CAP ONE PO BOX 85520 RICHMOND, VA 23285			Capital One Bank vs. Ahmad Stuckey Docket No.: DC-010654-14				6,982.00
ACCOUNT NO. 26804012	H						
DELBERT SERVICES/CONSU RODNEY SQUARE N 1100 N M WILMINGTON, DE 18901							2,580.00
ACCOUNT NO.	T		Attorney for Capital One Bank				
Keith J. Golub Nudelman, Klemm, & Golub, PC 425 Eagle Rock Avenue, Suite 403 Roseland, NJ 07068			Capital One Bank vs. Ahmad Stuckey Docket No.: DC-010654-14 Judgment VJ-009998-14/Wage Garnishment				Notice Only
ACCOUNT NO. 42073096000006679	T						
NEWARK POLICE FCU 1 LINCOLN AVE RM 306 NEWARK, NJ 07104							860.00
ACCOUNT NO.			Potential Lawsuit (Tort claims noticed				
Taquan Ward c/o The Maglione Firm, PC 186 Clinton Avenue Newark, NJ 07108			Defendant 1/23/2014)		X	X	Unknown
Sheet no. 1 of 2 continuation sheets atta to Schedule of Creditors Holding Unsecured	ched			Sub	tota	1⊳	\$ 10,422.00
Nonpriority Claims  Total > \$							

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

# Case 15-11772-CMG Doc 1 Filed 01/31/15 Entered 01/31/15 15:46:30 Desc Main Page 17 of 54 Document B6F (Official Form 6F) (12/07) - Cont. In re Ahmad Qadir Stuckey Case No. \_ Debtor (If known)

# SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 415248047 THE BUREAUS INC 1717 CENTRAL ST EVANSTON, IL 60201							7,819.00
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.  Sheet no. 2 of 2 continuation sheets attack.					total		

to Schedule of Creditors Holding Unsecured

Total ≥

38,215.00

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6G (Official Form 6G) (12/07)		Document	Paç	ge 18 of 54	

In re	Ahmad Qadir Stuckey	Case No.	
	Debtor		(if known)

# SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
ALLY FINANCIAL 200 RENAISSANCE CTR DETROIT, MI 48243	2012 Dodge Durango Lease (Repossessed 12/2014)

Debtor

In re Ahmad Qadir Stuckey

Case No.

Desc Main

Document

(if known)

# **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Willow Brown 195 Oak Street Sayreville, NJ 08879	Citi Mortgage

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New Hope	
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	Do	ocument Pa	age	20 of 54		
Fill in this information to identify	your case:					
Debtor 1 Ahmad Qadir Stu	ckey					
First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		District of NJ	_			
Case number(If known)		-		Check if th		
, ,					ended filing lement showing post-pet	ition
					13 income as of the following	
Official Form B 6I				MM / DD	/ YYYY	
Schedule I: You	ır Income					12/13
Be as complete and accurate as posupplying correct information. If you figure separated and your spouseparate sheet to this form. On the	ou are married and not fi ise is not filing with you top of any additional pa	iling jointly, and you , do not include info	ur spo ormat	ouse is living with your spou	ou, include information ab ise. If more space is need	out your spouse. ed, attach a
Fill in your employment						
information.		Debtor 1			Debtor 2 or non-filing	spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employe	ed		Employed Not employed	
Include part-time, seasonal, or self-employed work.		Police Officer				
Occupation may Include student	Occupation				<del></del>	
or homemaker, if it applies.	Employer's name	South Plainfield	d 			
	Employer's address	2480 Plainfield	Ave	:		
		Number Street			Number Street	
						<del></del>
		South Plainfiel	 d. NJ	 I 07080		<del>-</del>
		City	State		City Sta	te ZIP Code
	How long employed th	ere? 3 yrs, 6 i	mos			
Part 2: Give Details About	Monthly Income					
Estimate monthly income as of spouse unless you are separated		<b>rm</b> . If you have nothi	ng to	report for any line, wri	te \$0 in the space. Include	your non-filing
If you or your non-filing spouse had below. If you need more space, at			rmatio	on for all employers fo	r that person on the lines	
				For Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, sale deductions). If not paid monthly,			2.	6,165.07	\$ N.A.	
				Ψ	· <del></del>	

4. Calculate gross income. Add line 2 + line 3.

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# Ahmad Qadir Stuckey

10. Calculate monthly income. Add line 7 + line 9.

Official Form B 6I

Debtor 1	First Name Middle Name Last Name		C	Case number (if kno	wn)		
	r nos realite minute valite Last Mante						
			Fo	or Debtor 1		btor 2 or na spouse	
Cop	py line 4 here	<b>4</b> .	\$_	6,165.07	\$	N.A.	
5. List	t all payroll deductions:						
5a	. Tax, Medicare, and Social Security deductions	5a.	\$	1,198.68	\$	N.A.	
5b	Mandatory contributions for retirement plans	5b.	\$	667.87	\$	N.A.	
5c	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N.A.	
5d	Required repayments of retirement fund loans	5d.	\$	677.53	\$	N.A.	
5e	. Insurance	5e.	\$_	92.47	\$	N.A.	
5f.	Domestic support obligations	5f.	\$_	0.00	\$	N.A.	
5a	. Union dues	5g.	\$_	43.33	\$	N.A.	
Ŭ	. Other deductions. Specify:	5h.	+\$	0.00	+ \$	N.A.	
	dd the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.	6.	\$_ \$_	2,679.88	\$	N.A.	
7. <b>C</b> a	alculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	3,485.19	\$	N.A.	
8. <b>Lis</b>	st all other income regularly received:						
8a	Net income from rental property and from operating a business, profession, or farm						
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$_	0.00	\$	N.A.	
8b	o. Interest and dividends	8b.	\$	0.00	\$	N.A.	
8c	E. Family support payments that you, a non-filing spouse, or a dependent regularly receive	ent	Ψ_		· <del></del>		
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0.00	\$	N.A.	
8d	. Unemployment compensation	8d.	\$_	0.00	\$	N.A.	
	e. Social Security	8e.	\$_	0.00	\$	N.A.	
8f.	Other government assistance that you regularly receive		_				
	Include cash assistance and the value (if known) of any non-cash assistar that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	nce	\$_	0.00	\$	N.A.	

Specify:	8f.		
8g. Pension or retirement income	8g.	\$ 0.00	\$ N.A.
		0.00	3.7.4

8h. Other monthly income. Specify: 8h. +\$ N.A.

0.00 N.A 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and

other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

0.00

3,485.19

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12.

3,485.19 Combined

monthly income

page 2

3,485.19

N.A.

13. Do you expect an increase or decrease within the year after you file this form?

Schedule I: Your Income

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				_		
Fill in this information to identify	y your case:					
Debtor 1 Ahmad Qadir Stu	uckey Middle Name	Last Name		Check if this is:		
Debtor 2			г	An amended fi	lina	
(Spouse, if filing) First Name	Middle Name	Last Name	,,,   F		•	-petition chapter 13
United States Bankruptcy Court for the:		District of	NJ -	expenses as o		
Case number				MM / DD / YYYY	<del></del>	
(If known)				A separate filin	g for Debtor 2	2 because Debtor 2
Official Form <b>B</b> 6J				maintains a se	parate house	hold
Schedule J: Yo	ur Expen	ses				12/13
Be as complete and accurate as p information. If more space is need (if known). Answer every question	ded, attach another s					_
Part 1: Describe Your Ho	usehold					
1. Is this a joint case?						
No. Go to line 2.		•				
Yes. Does Debtor 2 live in a	separate nousenoid	7				
□ No □ Ves Debtor 2 must fi	ile a separate Schedu	ا ما				
<u> </u>	To a separate ocheda	ic 0.				
2. Do you have dependents?	No		Dependent's relation	ship to	Dependent's	Does dependent live
Do not list Debtor 1 and Debtor 2.		is information for nt	Debtor 1 or Debtor 2		age	with you?
Do not state the dependents'	·					No
names.						Yes
						∐ No ☐ Yes
						No
						Yes
						No
					<del></del>	Yes
						No
				<del></del>		Yes
3. Do your expenses include expenses of people other than yourself and your dependents?	X No Yes					
Part 2: Estimate Your Ongo	sing Monthly Eyns	neae				
Estimate your expenses as of you			ro using this form a	s a supplement in	a Chantor 13 o	case to report
expenses as of a date after the ba applicable date.		-	•		-	•
Include expenses paid for with no	n-cash government	assistance if you	ı know the value			
of such assistance and have inclu	ided it on <i>Schedule</i> i	l: Your Income (C	Official Form B 6l.)		Your expe	nses
4. <b>The rental or home ownership</b> any rent for the ground or lot.	expenses for your re	esidence. Include	first mortgage payme	ents and 4.	\$	1,948.88
If not included in line 4:						
4a. Real estate taxes				4a.	\$	0.00
4b. Property, homeowner's, or	renter's insurance			4b.	\$	0.00
4c. Home maintenance, repair,	, and upkeep expense	es		4c.	\$	50.00
4d Homeowner's association of	or condominium dues			4d	<b></b>	0.00

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Debtor 1

Ahmad Qadir Stuckey
First Name Middle Name Last Name

Case number (if known)\_\_\_\_\_

		Your expenses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$0.0
S. Utilities:		
6a. Electricity, heat, natural gas	6a.	\$
6b. Water, sewer, garbage collection	6b.	\$50.0
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$
6d. Other. Specify:	6d.	\$0.0
7. Food and housekeeping supplies	7.	\$ 300.0
3. Childcare and children's education costs	8.	\$ 0.0
Clothing, laundry, and dry cleaning	9.	\$ 100.0
. Personal care products and services	10.	\$ 50.0
Medical and dental expenses	11.	\$ 100.0
. Transportation. Include gas, maintenance, bus or train fare.		200.0
Do not include car payments.	12.	\$
Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$25.0
Charitable contributions and religious donations	14.	\$100.0
5. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	\$
15b. Health insurance	15b.	\$
15c. Vehicle insurance	15c.	\$150.0
15d. Other insurance. Specify:	15d.	\$
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$
. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a.	\$
17b. Car payments for Vehicle 2	17b.	\$ 0.0
17c. Other. Specify:	17c.	\$ 0.0
17d. Other. Specify:	17d.	\$ 0.0
Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form B 6I).	18.	\$
Other payments you make to support others who do not live with you.  Specify:	19.	\$0.0
Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Inc.	ome	
20a. Mortgages on other property	20a.	\$ 0.0
		\$ 0.0
20b. Real estate taxes  20c. Property, homeowner's, or renter's insurance	20b. 20c.	\$ 0.0
20d. Maintenance, repair, and upkeep expenses	20c. 20d.	\$ 0.0
20e. Homeowner's association or condominium dues	20u. 20e.	\$ 0.0

# Case 15-11772-CMG Doc 1 Filed 01/31/15 Entered 01/31/15 15:46:30 Desc Main Document Page 24 of 54

ebtor 1	Ahmad Qadır Stuckey First Name Middle Name Last Name	Case number (if known)		
Othe	r. Specify:Gifts, Haircuts, Emergency, Etc	_ 21.	+\$	100.00
	monthly expenses. Add lines 4 through 21. esult is your monthly expenses.	22.	\$	3,673.88
	late your monthly net income.  Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,485.19
23c.	Copy your monthly expenses from line 22 above.  Subtract your monthly expenses from your monthly income.  The result is your <i>monthly net income</i> .	23b. 23c.	<b>-</b> \$	-188.69
Do yo	u expect an increase or decrease in your expenses within the year	after you file this form?		
	ample, do you expect to finish paying for your car loan within the year or age payment to increase or decrease because of a modification to the te			
Ye				

B6 Summary (Official Form 6 - Summary) (12/14)

# United States Bankruptcy Court District of New Jersey

In re	Anmad Qadir Stuckey	Case No.
	Debtor	
		Chapter 7

# **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

# AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A – Real Property	YES	1	\$ 240,000.00		
B – Personal Property	YES	3	\$ 6,100.00		
C – Property Claimed as exempt	YES	1			
D – Creditors Holding Secured Claims	YES	1		\$ 220,423.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	2		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	3		\$ 38,215.00	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	2			\$ 3,485.19
J - Current Expenditures of Individual Debtors(s)	YES	3			\$ 3,673.88
ТОТ	TAL .	18	\$ 246,100.00	\$ 258,638.00	

# Of Coast of New Jersey Of Coast of New Jersey

In re	Ahmad Qadir Stuckey	Case No.	
	Debtor		
		Chapter 7	

# STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. §101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

# State the Following:

	-	
Average Income (from Schedule I, Line 12)	\$	3,485.19
Average Expenses (from Schedule J, Line 22)	\$	3,673.88
Current Monthly Income (from Form 22A-1 Line 11; <b>OR</b> , Form 22B Line 14; <b>OR</b> , Form 22C-1 Line 14)	\$	6,165.07

# State the Following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$	0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.0	00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$	0.00
4. Total from Schedule F		\$	38,215.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$	38,215.00

Case 15-11772-CMG Doc 1 Filed 01/31/15 Entered 01/31/15 15:46:30 Desc Main Document Page 27 of 54

B6 (Official Form 6 - Declaration) (12/07) Ahmad Oadir Stuckey In re Case No. (If known) **Debtor** DECLARATION CONCERNING DEBTOR'S SCHEDULES DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief. 01/29/2015 /s/ Ahmad Oadir Stuckey Not Applicable (Joint Debtor, if any) [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Social Security No. Printed or Typed Name and Title, if any, (Required by 11 U.S.C. § 110.) of Bankruptcy Petition Preparer If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document. Address Signature of Bankruptcy Petition Preparer Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP \_\_\_\_\_[the president or other officer or an authorized agent of the corporation or a member [corporation or partnership] named as debtor or an authorized agent of the partnership ] of the in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief. [Print or type name of individual signing on behalf of debtor.]

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

 $_{\mathrm{B7\,(Official Form\,7)\,(04713)}}$  Case 15-11772-CMG

# Doc 1 Filed 01/31/15 Entered 01/31/15 15:46:30 UNITED STATES PAGE TATCY COURT District of New Jersey Desc Main

		2 ibilion of them versey
In Re Ahma	ad Qadir Stuckey	Case No(if known)
	S	STATEMENT OF FINANCIAL AFFAIRS
inforr filed. provi indica or gu	formation for both spouses is combination for both spouses whether or not an individual debtor engaged in but the information requested on this state payments, transfers and the like to	d by every debtor. Spouses filing a joint petition may file a single statement on which ned. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish of a joint petition is filed, unless the spouses are separated and a joint petition is not siness as a sole proprietor, partner, family farmer, or self-employed professional, should statement concerning all such activities as well as the individual's personal affairs. To o minor children, state the child's initials and the name and address of the child's parent by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed
space	complete Questions 19 - 25. If the ar	eted by all debtors. Debtors that are or have been in business, as defined below, also nswer to an applicable question is "None," mark the box labeled "None." If additional tion, use and attach a separate sheet properly identified with the case name, case numbers.
DEFI	INITIONS	
the fil the vo emplo in a tr	idual debtor is "in business" for the p ling of this bankruptcy case, any of the oting or equity securities of a corpora oyed full-time or part-time. An indiversade, business, or other activity, other "Insider." The term "insider" in relatives; corporations of which the d	urpose of this form if the debtor is a corporation or partnership. An urpose of this form if the debtor is or has been, within six years immediately preceding ne following: an officer, director, managing executive, or owner of 5 percent or more of tion; a partner, other than a limited partner, of a partnership; a sole proprietor or self-idual debtor also may be "in business" for the purpose of this form if the debtor engages than as an employee, to supplement income from the debtor's primary employment. cludes but is not limited to: relatives of the debtor; general partners of the debtor and ebtor is an officer, director, or person in control; officers, directors, and any persons in tives; affiliates of the debtor and insiders of such affiliates; and any managing agent of
	ebtor. 11 Û.S.C. § 101(2), (31).	
	1. Income from employment of	or operation of business
None	the debtor's business, including peginning of this calendar year two years immediately preceding the basis of a fiscal rather than a of the debtor's fiscal year.) If a j	e the debtor has received from employment, trade, or profession, or from operation of part-time activities either as an employee or in independent trade or business, from the of the date this case was commenced. State also the gross amounts received during the goal this calendar year. (A debtor that maintains, or has maintained, financial records on calendar year may report fiscal year income. Identify the beginning and ending dates oint petition is filed, state income for each spouse separately. (Married debtors filing nust state income of both spouses whether or not a joint petition is filed, unless the petition is not filed.)
	AMOUNT	SOURCE

2015

2014

2013

7000.00

75670.00 99755.00

2

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# 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

None

# 3. Payments to creditors

 $\boxtimes$ 

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS

AMOUNT PAID AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*)any payments that were made to a creditor on account of a domestic support obligation or as part of an alternativerepayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATES OF PAYMENTS

AMOUNT PAID AMOUNT STILL OWING

<sup>\*</sup>Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after date of adjustment.

ALLY FINANCIAL

DETROIT, MI 48243

200 RENAISSANCE CTR

2012 Dodge Durango

Lease

None	for the benefit of creditors wh	to are or were insiders. (Mar. both spouses whether or not	nediately preceding the commence ried debtors filing under chapter a joint petition is filed, unless the	12 or chapter 13 must
	AND ADDRESS OF CREDITORELATIONSHIP TO DEBTOR			AMOUNT STILL OWING
	4. Suits and administrative pro	ceedings, executions, garnishm	ents and attachments	
None	preceding the filing of this ba	nkruptcy case. (Married debt or both spouses whether or no	the debtor is or was a party within ors filing under chapter 12 or cl t a joint petition is filed, unless th	hapter 13 must include
_	ON OF SUIT NATU SE NUMBER	RE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
Ahmad Docket	One Bank vs. Civil Act Stuckey No.: 0654-14	ion	Middlesex County	Judgment VJ-009998-14
None	one year immediately precedin	g the commencement of this concerning property of either	ed or seized under any legal or ease. (Married debtors filing under or both spouses whether or not ed.)	er chapter 12 or chapter
PERSO	ME AND ADDRESS OF ON FOR WHOSE BENEFIT OPERTY WAS SEIZED	DATE ( SEIZUF		DESCRIPTION AND VALUE OF PROPERTY
	5. Repossessions, foreclosure	s and returns		
None	lieu of foreclosure or returned (Married debtors filing under	to the seller, within one year chapter 12 or chapter 13 mu	, sold at a foreclosure sale, transfimmediately preceding the comm st include information concerning e spouses are separated and a join	nencement of this case.  ag property of either or
AD	AME AND DRESS OF OR OR SELLER	DATE OF REPOSESSION FORECLOSURE SALE TRANSFER OR RETU	E,	DESCRIPTION AND VALUE OF PROPERTY

12/2014

B7 (Official Form 7) (04/13)

# 6. Assignments and Receiverships

None  $\boxtimes$ 

Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None X

List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF **CUSTODIAN**  NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF **ORDER** 

DESCRIPTION AND VALUE OF PROPERTY

Desc Main

4

7. Gifts

None X

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY DATE OF **GIFT** 

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

\$5000

Gambling

2014

# 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

Scott R. Miller, Esq. 203 Easton Avenue New Brunswick, NJ 08901 Various \$1,250.00

# 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

None

M

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR
DESCRIPTION AND
VALUE OF PROPERTY OR
DEBTOR'S INTEREST IN PROPERTY

# 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

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# 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

## 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF AMOUNT OF

SETOFF SETOFF

# 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

# 15. Prior address of debtor

None

If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

# 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

## 17. Environmental Sites

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME NAME AND ADDRESS DATE OF ENVIRONMENTAL AND ADDRESS OF GOVERNMENTAL UNIT NOTICE LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None

SITE NAME NAME AND ADDRESS DATE OF ENVIRONMENTAL AND ADDRESS OF GOVERNMENTAL UNIT NOTICE LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

None

NAME AND ADDRESS OF GOVERNMENTAL UNIT DOCKET NUMBER

STATUS OR DISPOSITION

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# 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

**NAME** 

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN **ADDRESS** 

NATURE OF BUSINESS BEGINNING AND ENDING DATES

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME ADDRESS

# [Questions 19 - 25 are not applicable to this case]

\* \* \* \* \* \*

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date 01/29/2015

Signature of Debtor

/s/ Ahmad Qadir Stuckey

AHMAD QADIR STUCKEY

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B7 (Official Form 7) (04/13)

9

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Signature of Bankruptcy Petition Preparer

0 continuation sheets attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §152 and 3571

## DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

Date

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) if

rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.	
Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer	Social Security No. (Required by 11 U.S.C. § 110(c).)
If the bankruptcy petition preparer is not an individual, state the name, title (if any), addres partner who signs this document.	s, and social security number of the officer, principal, responsible person, or
Address	

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. §156.

B8 (Official Form 8) (12/08)

# UNITED STATES BANKRUPTCY COURT District of New Jersey

	Ahmad Qadir Stuckey		
In re	,	Case No.	
	Debtor	Cusc 110.	Chapter 7

## CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

**PART A** - Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1	
Creditor's Name: CITIMORTGAGE INC PO BOX 9438	Describe Property Securing Debt: 195 Oak Street Sayreville, NJ 08879
GAITHERSBURG, MD 20898	Sayrevine, NJ 000/9
Decree III.	
Property will be (check one):  Surrendered Retained	
If retaining the property, I intend to (check at least one):	
Redeem the property  Reaffirm the debt	
Other. Explain	(for example, avoid lien
using 11 U.S.C. §522(f)).	(for example, avoid fich
Property is (check one):	
Claimed as exempt	Not claimed as exempt
Property No. 2 (if necessary)	
Creditor's Name:	Describe Property Securing Debt:
Property will be (check one):	
Surrendered	
If retaining the property, I intend to (check at least one):	
☐ Redeem the property ☐ Reaffirm the debt	
Other. Explain	(for example, avoid lien
using 11 U.S.C. §522(f)).	(for example, avoid field
5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
Property is (check one):	
☐ Claimed as exempt ☐ Ŋ	Not claimed as exempt
L	

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B8 (Official Form 8) (12/08)

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PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for Each unexpired lease. Attach additional pages if necessary.)

Property No. 1		
Lessor's Name: ALLY FINANCIAL	Describe Leased Property: 2012 Dodge Durango Lease	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2)):
200 RENAISSANCE CTR DETROIT, MI 48243	(Repossessed 12/2014)	☐ YES <b>位</b> NO
Property No. 2 (if necessary)		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2)):
		☐ YES ☐ NO
		•
Property No. 3 (if necessary)		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2)):
		☐ YES ☐ NO
0 continuation sheets attached (	(if any)	
I declare under penalty of perjury t	hat the above indicates my intention as to	o any property of my
	l property subject to an unexpired lease.	
Date: 01/29/2015	/s/ Ahmad Qadir Stu	ckey
<u> </u>	Signature of Debtor	
	Signature of Joint Debt	or

B 201B (Form 201B) (12/09)

# United States Bankruptcy Court District of New Jersey

re Ahmad Qadir Stuckey	Case No	
Debtor	(If kno	wn)
CERTIFICATION OF NOTICE UNDER § 342(b) OF THE	CE TO CONSUMER DEBTO HE BANKRUPTCY CODE	R(S)
Certification of [Non-Attorney]	Bankruptcy Petition Preparer	
I, the [non-attorney] bankruptcy petition preparer signing ebtor the attached notice, as required by § 342(b) of the Bankrup		elivered to the
Printed name and title, if any, of Bankruptcy Petition Preparer Address:	Social Security number (If the bankr preparer is not an individual, state th number of the officer, principal, resp or partner of the bankruptcy petition	e Social Security onsible person,
Signature of Bankruptcy Petition Preparer or officer, Principal, responsible person, or partner whose Social Security number is provided above.	(Required by 11 U.S.C. § 110.)	
Certification  I, (We), the debtor(s), affirm that I (we) have received and reactions.	of the Debtor d the attached notice, as required by § 342(b) of	the Bankruptcy
Ahmad Qadir Stuckey	x /s/ Ahmad Qadir Stuckey Signature of Debtor	01/29/2015
Printed Names(s) of Debtor(s)  Case No. (if known)	Signature of Debtor	Date
	Signature of Joint Debtor, (if any)	Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

ALLY FINANCIAL 200 RENAISSANCE CTR DETROIT, MI 48243

ALLY FINANCIAL 200 RENAISSANCE CTR DETROIT, MI 48243

AMEX
PO BOX 297871
FORT LAUDERDALE, FL 33329

BK OF AMER P.O. BOX 7047 DOVER, DE 19903

Bryan Cowan c/o Law Offices of O'Keke & Associates One Gateway Center, Suite 2600 Newark, NJ 07102

CAP ONE PO BOX 85520 RICHMOND, VA 23285

CITIMORTGAGE INC PO BOX 9438 GAITHERSBURG, MD 20898

DELBERT SERVICES/CONSU RODNEY SQUARE N 1100 N M WILMINGTON, DE 18901

Keith J. Golub
Nudelman, Klemm, & Golub, PC
425 Eagle Rock Avenue, Suite 403
Roseland, NJ 07068

NEWARK POLICE FCU 1 LINCOLN AVE RM 306 NEWARK, NJ 07104

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Taquan Ward c/o The Maglione Firm, PC 186 Clinton Avenue Newark, NJ 07108

THE BUREAUS INC 1717 CENTRAL ST EVANSTON, IL 60201

Willow Brown 195 Oak Street Sayreville, NJ 08879 B203 12/94

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# United States Bankruptcy Court District of New Jersey

	In re Ahmad Qadir Stuckey	Case No	)	
		Chapter	7	
	Debtor(s)	•		
	DISCLOSURE OF COMPENSATION O	OF ATTORNEY FOR	DEBTOR	
	Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I cert and that compensation paid to me within one year before the filing rendered or to be rendered on behalf of the debtor(s) in contempl	of the petition in bankrupt	cy, or agreed	to be paid to me, for services
	For legal services, I have agreed to accept	\$1	,250.00	
	Prior to the filing of this statement I have received			
	Balance Due			
2.	The source of compensation paid to me was:			
	☑ Debtor ☐ Other (specify)			
3.	The source of compensation to be paid to me is:			
	☑ Debtor ☐ Other (specify)			
4. asso	I have not agreed to share the above-disclosed compensation ociates of my law firm.	on with any other person ur	nless they are	members and
of m	I have agreed to share the above-disclosed compensation wy law firm. A copy of the agreement, together with a list of the name			
5.	In return for the above-disclosed fee, I have agreed to render leg	al service for all aspects of	the bankrupto	cy case, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice</li> <li>b. Preparation and filing of any petition, schedules, statements of a</li> <li>c. Representation of the debtor at the meeting of creditors and cond</li> <li>d. Representation of the debtor in adversary proceedings and other</li> </ul>	affairs and plan which may b firmation hearing, and any a	e required; idjourned heari	
6.	By agreement with the debtor(s), the above-disclosed fee does not	t include the following service	es:	
	CE	RTIFICATION		
	I certify that the foregoing is a complete statement of any a debtor(s) in the bankruptcy proceeding.	agreement or arrangement	for payment t	to me for representation of the
	01/29/2015	/s/ Scott R Miller		
	Date		gnature of Atto	orney
		Scott R. Miller, Esq.		
		Na	me of law firn	7

Fill in this information to identify your case:				
Debtor 1	Ahmad Qadir Stuckey			
-	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court fo	or the:	District of $\frac{NJ}{\text{(State)}}$	
Case number (If known)				

Check one box only as directed in this form and in Form 22A-1Supp:			
1. There is no presumption of abuse.			
2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 22A–2).			
3. The Means Test does not apply now because of			

☐ Check if this is an amended filing

## Official Form 22A-1

## **Chapter 7 Statement of Your Current Monthly Income**

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 22A-1Supp) with this form.

### Part 1: Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
  - Not married. Fill out Column A, lines 2-11.
  - Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
  - ☐ Married and your spouse is NOT filing with you. You and your spouse are:
    - Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
    - Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Column A

Debtor 1

Column B

Debtor 2 or

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Debtor 1	non-filing spouse
Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ <u>6,165.07</u>	\$0.00
Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$0.00	\$0.00
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$0.00	\$0.00
5. Net income from operating a business, profession, or farm  Gross receipts (before all deductions) \$0.00  Ordinary and necessary operating expenses - \$0.00  Net monthly income from a business, profession, or farm \$0.00 copy here→	\$0.00	\$0.00
6. Net income from rental and other real property Gross receipts (before all deductions)  Ordinary and necessary operating expenses  \$0.00		
Net monthly income from rental or other real property \$0.00 Copy here →	\$ <u>0.00</u>	\$0.00
7. Interest, dividends, and royalties	\$0.00	\$0.00

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Debtor	Ahmad Qadir Stuckey First Name Middle Name Last Name	<del></del>	Case number (if known)		
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
8. U	nemployment compensation		\$ 0.00	\$ 0.00	
D	o not enter the amount if you contend that the amount ider the Social Security Act. Instead, list it here:		Ψ	Ψ	
	For you	0.00			
	For your spouse	\$0.00			
	ension or retirement income. Do not include any amo enefit under the Social Security Act.	ount received that was a	\$0.00	\$0.00	
D a:	come from all other sources not listed above. Specto not include any benefits received under the Social Sector a victim of a war crime, a crime against humanity, or irrorism. If necessary, list other sources on a separate	ecurity Act or payments receinternational or domestic			
	0a		\$0.00	\$0.00	
	0b		\$0.00	\$0.00	
	0c. Total amounts from separate pages, if any.		+\$0.00	+ \$0.00	
	alculate your total current monthly income. Add line olumn. Then add the total for Column A to the total for Column A		\$ <u>6,165.07</u>	\$0.00	\$_6,165.07  Total current monthly income
Part	2: Determine Whether the Means Test App	olies to You			
12. <b>C</b> :	alculate your current monthly income for the year.	Follow these steps:			
1:	a. Copy your total current monthly income from line	1	Сору	line 11 here 3 12a.	\$ <u>6,165.07</u>
	Multiply by 12 (the number of months in a year).				<b>x</b> 12
1:	b. The result is your annual income for this part of th	e form.		12b.	\$ <u>73,980.84</u>
13. <b>C</b>	alculate the median family income that applies to y	ou. Follow these steps:			
F	Il in the state in which you live.	NewJersey			
F	Il in the number of people in your household.	1		r	1
Т	Il in the median family income for your state and size on find a list of applicable median income amounts, go constructions for this form. This list may also be available a	nline using the link specified	in the separate	13.	\$_60,265.00
1	ow do the lines compare?				
	a. Line 12b is less than or equal to line 13. On the Go to Part 3.				
14	b. Line 12b is more than line 13. On the top of pag Go to Part 3 and fill out Form 22A–2.	e 1, check box 2, <i>The presu</i>	mption of abuse is deter	mined by Form 22A-	2.
Part	3: Sign Below				
	By signing here, I declare under penalty of perjui	ry that the information on this	s statement and in any a	ttachments is true an	nd correct.
	✗/s/ Ahmad Qadir Stuckey	×			
	Signature of Debtor 1		Signature of Debtor 2		
	Date 01/29/2015 MM / DD / YYYY		Date	-	
	If you checked line 14a, do NOT fill out or file Fo	rm 22A–2.			
	If you checked line 14b, fill out Form 22A–2 and				

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Fill in this information to identify your case:				
Debtor 1 Ahmad Qadir Stuckey				
_	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court fo	or the:	District of $\frac{NJ}{\text{(State)}}$	
Case number (If known)				

Check the appropriate box as directed in lines 40 or 42
According to the calculations required by this Statement:
△ 1. There is no presumption of abuse.
2. There is a presumption of abuse.
☐ Check if this is an amended filing

## Official Form 22A-2

## **Chapter 7 Means Test Calculation**

12/14

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 22A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

P	art 1:	Determine Your Adjusted Income				
1.	Сору у	our total current monthly income.	Copy line 11 from Offici	al Form 22A-1 here→1.	\$ <u>6</u>	,165.07
2.	Did you	ı fill out Column B in Part 1 of Form 22A–1?				
	X No.	Fill in \$0 on line 3d.				
	☐ Yes	s. Is your spouse filing with you?				
		No. Go to line 3.				
		Yes. Fill in \$0 on line 3d.				
3.		your current monthly income by subtracting any part of your solutions and the second states of you or your dependents. Follow these steps:	pouse's income not used	I to pay for the		
		11, Column B of Form 22A–1, was any amount of the income you re rethe household expenses of you or your dependents?	eported for your spouse No	OT regularly		
	☑ No.	Fill in 0 on line 3d.				
	☐ Yes	s. Fill in the information below:				
		State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt or to support people other than you or your dependents	Fill in the amount you are subtracting from your spouse's income			
	3	a	\$			
	3	0	\$			
	3	5	+ \$			
	3	d. <b>Total.</b> Add lines 3a, 3b, and 3c	\$	Copy total here 3d.	<b>-</b> \$	0.00
4.	Adjust	your current monthly income. Subtract line 3d from line 1.			<b>\$</b> 6	,165.07

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Debtor 1

Ahmad Qadir Stuckey

Case number (if known)

Part 2:

**Calculate Your Deductions from Your Income** 

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from income in lines 5 and 6 of Form 22A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the form refers to you, it means both you and your spouse if Column B of Form 22A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

**National Standards** 

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You must use the IRS National Standards to answer the questions in lines 6-7.

6. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$ 583.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

Out-of-pocket health care allowance per person

60.00

Number of people who are under 65

Subtotal. Multiply line 7a by line 7b.

60.00

Copy line 7c 60.00 here ----...

People who are 65 years of age or older

Out-of-pocket health care allowance per person

144.00

Number of people who are 65 or older

Subtotal. Multiply line 7d by line 7e.

Copy line 7f 0.00 here

0.00

Total. Add lines 7c and 7f.....

60.00

Copy total here

60.00

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Dobtor	1	

Ahmad Qadir Stuckey
First Name Middle Name

Case number (if known)\_

Local Standards

You must use the IRS Local Standards to answer the guestions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- Housing and utilities Insurance and operating expenses
- Housing and utilities Mortgage or rent expenses

To answer the questions in lines 8-9, use the U.S. Trustee Program chart.

To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

8. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. MIDDLESEX COUNTY

531.00

- 9. Housing and utilities Mortgage or rent expenses:
  - 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses.

\$ 1,727.00

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of the creditor	Average monthly payment
Citimortgage	\$_1,948.88
	\$
	+ \$
9b. Total average monthly payment	\$_1,948.88

Repeat this Copy line 9b 1,948.88 amount on here line 33a

9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this amount is less than \$0, enter \$0.

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

Explain why:

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- 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense.
  - 0. Go to line 14.
  - X 1. Go to line 12.
  - 2 or more. Go to line 12.
- 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

542.00

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Debtor 1

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Ahmad Qadir Stuckey

Last Name

Case number (if known)\_

Vehicle 1 Describe		Describe Vehicle 1:	2002000 Ford T	Taurus				-		
					<del> </del>			-		
13a.	Owne	ership or leasing costs of	using IRS Local Stan	ndard	13a.	\$	0.00			
13b.		ige monthly payment for the include costs for leas		by Vehicle 1.						
	amou		lly due to each secur	and on line 13e, add all red creditor in the 60 mont	hs					
	Na	ame of each creditor for	Vehicle 1	Average monthly payment						
				\$0.00	Copy 13b here <del>■</del>	<b>-</b> \$	0.00	Repeat this amount on line 33b.		
13c.		ehicle 1 ownership or le	•	ess than \$0, enter \$0.	13c.	\$	0.00	Copy net Vehicle 1 expense	\$_	_
Vehi	icle 2	Describe Vehicle 2:	N.A					_		
								-		
13d.	Owne	Describe Vehicle 2: ership or leasing costs using monthly payment foliocosts for leased vehicles.	using IRS Local Star	ndard	13d.	\$	0.00	-		
13d.	Owne Avera includ	ership or leasing costs o	using IRS Local Star or all debts secured b cles.	ndard		\$		-		
13d.	Owne Avera includ	ership or leasing costs or age monthly payment for the costs for leased vehi ame of each creditor for	using IRS Local Star or all debts secured b cles.	ndard by Vehicle 2. Do not  Average monthly		\$ \$		Repeat this amount on line 33c.		
13d. 13e.	Owne Avera includ Na N.A	ership or leasing costs or age monthly payment for the costs for leased vehi ame of each creditor for	using IRS Local Star or all debts secured b cles. Vehicle 2	Average monthly payment  \$ 0.00	13d. Copy 13e	\$ \$   \$	0.00	amount on	\$_	_
13d. 13e.	Owne Avera includ Na Not Ve Subtra	ership or leasing costs of the costs for leased vehicle costs for leased vehicle ame of each creditor for the costs for leased vehicle 2 ownership or leact line 13e from 13d. If the costs for lease the cost	using IRS Local Star or all debts secured b cles.  Vehicle 2  ease expense this amount is less t	Average monthly payment  \$ 0.00	Copy 13e here	\$ = \$ \$	0.00	amount on line 33c.  Copy net Vehicle 2 expense here	\$_ \$_	

### Case 15-11772-CMG Doc 1 Filed 01/31/15 Entered 01/31/15 15:46:30 Desc Main Document Page 49 of 54

Debtor 1

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Ahmad Qadir Stuckey

Last Name

Case number (if known)\_\_\_\_

Other Necessary Expenses	In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.	
employment taxes, social se pay for these taxes. Howeve subtract that number from th	nount that you will actually owe for federal, state and local taxes, such as income taxes, self- ecurity taxes, and Medicare taxes. You may include the monthly amount withheld from your er, if you expect to receive a tax refund, you must divide the expected refund by 12 and ne total monthly amount that is withheld to pay for taxes.	\$1,231.04
Do not include real estate, s	ales, or use taxes.	
union dues, and uniform cos		<b>\$</b> 711.21
Do not include amounts that	t are not required by your job, such as voluntary 401(k) contributions or payroll savings.	Ψ <u>/11.21</u>
together, include payments t	onthly premiums that you pay for your own term life insurance. If two married people are filing that you make for your spouse's term life insurance. Do not include premiums for life nts, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$0.00
agency, such as spousal or	• • • •	\$ 0.00
Do not include payments on	past due obligations for spousal or child support. You will list these obligations in line 35.	<del></del>
	ly amount that you pay for education that is either required:	
as a condition for your job		© 0.00
■ for your physically or men	ntally challenged dependent child if no public education is available for similar services.	<b>*</b>
	y amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.  any elementary or secondary school education.	\$0.00
is required for the health and health savings account. Inclu	benses, excluding insurance costs: The monthly amount that you pay for health care that d welfare of you or your dependents and that is not reimbursed by insurance or paid by a ude only the amount that is more than the total entered in line 7. In the increase or health savings accounts should be listed only in line 25.	\$_200.00
you and your dependents, s	elephone services: The total monthly amount that you pay for telecommunication services for such as pagers, call waiting, caller identification, special long distance, or business cell phone sary for your health and welfare or that of your dependents or for the production of income, if it imployer.	+ \$_200.00
	basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 22A-1, or any amount you previously deducted.	
Add lines 6 through 23.	lowed under the IRS expense allowances.	\$ <u>4,058.</u> 25
Aud IIIIes o lillougii 23.		

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Debtor 1

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Ahmad Qadir Stuckey
First Name Middle Name

Last Name

Case number (if known)	
------------------------	--

Ad	ditional Expense Deductions  These are additional deductions allowed by the Means Test.  Note: Do not include any expense allowances listed in lines 6-24.	
25.	<b>Health insurance, disability insurance, and health savings account expenses.</b> The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.	
	Health insurance \$92.47	
	Disability insurance \$0.00	
	Health savings account + \$0.00	
	Total \$ 92.47 Copy total here →	\$92.47
	Do you actually spend this total amount?	
	No. How much do you actually spend?  Yes  S	
26.	Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.	\$0.00
27.	<b>Protection against family violence.</b> The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.	\$0.00
	By law, the court must keep the nature of these expenses confidential.	
28.	<b>Additional home energy costs.</b> Your home energy costs are included in your non-mortgage housing and utilities allowance on line 8.	
	If you believe that you have home energy costs that are more than the home energy costs included in the non-mortgage housing and utilities allowance, then fill in the excess amount of home energy costs.	\$0.00
	You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.	
29.	<b>Education expenses for dependent children who are younger than 18.</b> The monthly expenses (not more than \$156.25* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school.	\$0.00
	You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.	
	* Subject to adjustment on 4/01/16, and every 3 years after that for cases begun on or after the date of adjustment.	
30.	Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.	\$ <u>0.0</u> 0
	To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.	
	You must show that the additional amount claimed is reasonable and necessary.	
31.	Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 26 U.S.C. § 170(c)(1)-(2).	\$ <u>100.00</u>
32.	Add all of the additional expense deductions.  Add lines 25 through 31.	\$ <u>192.4</u> 7

Case number (if known)\_

		Loans on your first two ve	hiclos:			
		_				
	33b.	Copy line 13b here				
	33c.	Copy line 13e here				
	Name	of each creditor for other secu	red debt	Identify propert	y that secures	Do ind ins
	33d					
	33e					
	33f					
3	3g. To	tal average monthly payment	. Add lines			
34.	Are ar or oth	tal average monthly payment by debts that you listed in li er property necessary for your control of the contro	Add lines ne 33 sec our supp	ured by your pri ort or the suppo	mary resider ort of your de	pe
34.	Are ar or oth	tal average monthly payment by debts that you listed in li er property necessary for y	ne 33 sector support	ured by your pri ort or the suppo to a creditor, in a of your property (	mary resider of your de	nce pe
34.	Are ar or oth	tal average monthly payment by debts that you listed in liver property necessary for your continuous state any amount that you listed in line 33, to keep por	ne 33 sector supports a must pay passession on the informal identify	ured by your pri ort or the suppo to a creditor, in a of your property (	mary resider of your de	pei pay
34.	Are ar or oth	tal average monthly payment by debts that you listed in liver property necessary for you.  Go to line 35.  State any amount that you listed in line 33, to keep por Next, divide by 60 and fill in	me 33 sector supports a must pay possession on the informal lidentify secure	ured by your pri ort or the suppo to a creditor, in a of your property ( mation below.	mary resider of your de ddition to the called the <i>cur</i>	pei pay
34.	Are ar or oth	tal average monthly payment by debts that you listed in liver property necessary for you.  Go to line 35.  State any amount that you listed in line 33, to keep por Next, divide by 60 and fill in	me 33 sector supports a must pay possession on the informal lidentify secure	ured by your pri ort or the suppo to a creditor, in a of your property ( mation below. y property that s the debt	mary resider ort of your de ddition to the called the cure Total cure amount	pay pay
34.	Are ar or oth	tal average monthly payment by debts that you listed in liver property necessary for you.  Go to line 35.  State any amount that you listed in line 33, to keep por Next, divide by 60 and fill in	me 33 sector supports a must pay possession on the informal lidentify secure	ured by your pri ort or the suppo to a creditor, in a of your property ( mation below. y property that s the debt	mary resider ort of your de addition to the called the cure amount  \$	par par

eduction	ns for Debt Pa	ıyment									
		ecured by an int			own, inclu	ıding h	ome moi	rtgages,	vehicle		
To calc	ulate the total	average monthly	y payment, ac	dd all amounts	that are con	ntractua	Illy due to	each se	ecured		
								Avera payme	ge monthly		
	Mortgages on	•					_				
33a. C	Copy line 9b he	ere					→	\$	1,948.88		
L	Loans on you	ır first two vehic	cles:								
33b. C	Copy line 13b l	here					→	\$	0.00		
00 - C	Camu lina 12a l	h a ra					_	\$	0.00		
33c. C	Jopy line 13e i	here					🕶	Φ			
Name o	of each creditor	r for other secured		ntify property th debt	1		taxes or				
33d							No Yes	\$	0.00		
33e						_	No Yes	\$	0.00		
33f							No Yes	+ \$	0.00		
aaa Tots	al average mo	nthly payment. A	\dd lines 33a	through 33f				· ·	1,948.88	Copy total	\$ <sup>1,948.8</sup>
oog. Tota	al average illo	Titiliy payitietit. A	Add IIIIes 55a	tillough 55i				Ψ		here	\$
or othe	Go to line 35 S. State any an	nount that you m 33, to keep poss	ur support on nust pay to a desession of you	r the support of creditor, in addi or property (call	of your dep	<b>enden</b> baymer	ts?				
or othe	Go to line 35 S. State any an	5. nount that you m 33, to keep poss by 60 and fill in t	nust pay to a consession of you the informatio	creditor, in addi ur property (call n below.	of your deption to the ped the cure	<b>enden</b> baymer	ts?		thly cure		
or othe	Go to line 35 s. State any an listed in line Next, divide	5. nount that you m 33, to keep poss by 60 and fill in t	ur support of nust pay to a c session of you the informatio	creditor, in addi ar property (call in below. eerty that debt	tion to the ped the cure  Total cure	oenden oaymer e amoui	ts? ats at).	amo			
or othe	Go to line 35 s. State any an listed in line Next, divide	5. nount that you m 33, to keep poss by 60 and fill in t	nust pay to a consession of you the informatio	creditor, in addi ir property (call n below. erty that debt	tion to the ped the cure  Total cure  amount	paymer e amour	ts?  tts  nt).	amo \$			
or othe	Go to line 35 s. State any an listed in line Next, divide	5. nount that you m 33, to keep poss by 60 and fill in t	nust pay to a consession of you the informatio	creditor, in addi ar property (call in below. eerty that debt	tion to the ped the cure  Total cure  amount	paymer e amour	ts? ats at).	amo			
or othe	Go to line 35 s. State any an listed in line Next, divide	5. nount that you m 33, to keep poss by 60 and fill in t	nust pay to a consession of you the informatio	creditor, in addi ir property (call n below. erty that debt	tion to the ped the cure  Total cure amount	paymer e amour ÷	ts?  tts  nt).	amo \$			

No. Go to line 36.

lacksquare Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims .....

0.00

0.00

 $\div$  60 =

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Debtor 1	Ahmad Q	adir Stuckey	,	Case number (if known)	
	First Name	Middle Name	Last Name		

36. Are you eligible to file a case under Chapter 13? 11 U. For more information, go online using the link for Bankrup instructions for this form. Bankruptcy Basics may also be	tcy Basics specified in the se		
No. Go to line 37.			
Yes. Fill in the following information.			
Projected monthly plan payment if you were filing	under Chapter 13	\$N.A	
Current multiplier for your district as stated on the	list issued by the		
Administrative Office of the United States Courts North Carolina) or by the Executive Office for Unit other districts).		x N.A.	
To find a list of district multipliers that includes you link specified in the separate instructions for this f available at the bankruptcy clerk's office.			
Average monthly administrative expense if you we	ere filing under Chapter 13	\$N.A. Copy to here	g 11.71.
37. Add all of the deductions for debt payment. Add lines 33g through 36.			\$ <u>1,948.88</u>
Total Deductions from Income			
38. Add all of the allowed deductions.			
Copy line 24, All of the expenses allowed under IRS expense allowances	\$ 4,058.25		
Copy line 32, All of the additional expense deductions	\$192.47		
Copy line 37, All of the deductions for debt payment	<b>+</b> \$ 1,948.88		
Total deductions	\$6,199.60	Copy total here →	\$ <u>6,199.60</u>
Part 3: Determine Whether There Is a Presumption	on of Abuse		
39. Calculate monthly disposable income for 60 months			
39a. Copy line 4, adjusted current monthly income	\$6,165.07		
39b. Copy line 38, Total deductions	<b>-</b> \$ <u>6,199.60</u>		
39c. Monthly disposable income. 11 U.S.C. § 707(b)(2). Subtract line 39b from line 39a.	\$34.53	Copy line \$ -34.53	
For the next 60 months (5 years)		x 60	
39d. <b>Total</b> . Multiply line 39c by 60		39d. \$ -2,071.80 lir	-2,071.80
			Ψ
40. Find out whether there is a presumption of abuse. Chec	ck the box that applies:		
The line 39d is less than \$7,475*. On the top of page to Part 5.	1 of this form, check box 1, The	here is no presumption of abuse. Go	)
☐ The line 39d is more than \$12,475*. On the top of pag may fill out Part 4 if you claim special circumstances. The		There is a presumption of abuse. Y	ou
☐ The line 39d is at least \$7,475*, but not more than \$			
* Subject to adjustment on 4/01/16, and every 3 years	after that for cases filed on or	after the date of adjustment.	

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#### Case 15-11772-CMG Doc 1 Filed 01/31/15 Entered 01/31/15 15:46:30 Desc Main Document Page 53 of 54

Debtor 1	Ahmad	Ahmad Qadir Stuckey			Case nun	mber (if known)	
	First Name	Middle Name	Last Name				

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41. 41a.	Fill in the amount of your total nonpriority unsecured debt. If you summary of Your Assets and Liabilities and Certain Statistical Information (Official Form 6), you may refer to line 5 on that form.		\$0.00 x .25	
<b>41b</b> .	25% of your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(3 Multiply line 41a by 0.25.	2)(A)(i)(I)	\$Copy	\$
is en	rmine whether the income you have left over after subtracting all a lough to pay 25% of your unsecured, nonpriority debt.	llowed deductions		
	.ine 39d is less than line 41b. On the top of page 1 of this form, check to Part 5.	box 1, There is no presun	mption of abuse.	
	<b>.ine 39d is equal to or more than line 41b.</b> On the top of page 1 of thi <i>f abuse</i> . You may fill out Part 4 if you claim special circumstances. The		e is a presumption	
Part 4:	Give Details About Special Circumstances			
	have any special circumstances that justify additional expenses or able alternative? 11 U.S.C. § 707(b)(2)(B).	adjustments of current	monthly income for whic	h there is no
∑a No	Go to Part 5.			
☐ Yes.	Fill in the following information. All figures should reflect your average of for each item. You may include expenses you listed in line 25.	monthly expense or incom	ne adjustment	
	You must give a detailed explanation of the special circumstances that adjustments necessary and reasonable. You must also give your case expenses or income adjustments.	make the expenses or inc trustee documentation of	come your actual	
	Give a detailed explanation of the special circumstances		Average monthly expense or income adjustment	
			\$	
			\$	
			\$	
			\$	
Part 5:	Sign Below			
	By signing here, I declare under penalty of perjury that the information of	on this statement and in a	ny attachments is true and	correct.
	-			
	/s/ Ahmad Qadir Stuckey Signature of Debtor 1	Signature of Debtor 2		
	Date 01/29/2015 MM / DD / YYYY	Date	_	
	191191 / UU / IIII	ו זווו טטוואו		

Debtor 1 Ahmad Qadir Stuckey

Last Name Middle Name

Case Number (if known)

First Name

## **Form 22 Continuation Sheet**

**Monthly Income** 

Month 1 Gross wages, salary, tips Income from business Rents and real property income Interest, dividends Pension, retirement Contributions to HH Exp Unemployment Other Income	5,690.84 0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00	Month 2 Gross wages, salary, tips Income from business Rents and real property income Interest, dividends Pension, retirement Contributions to HH Exp Unemployment Other Income	5,690.84 0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0
Month 3 Gross wages, salary, tips Income from business Rents and real property income Interest, dividends Pension, retirement Contributions to HH Exp Unemployment Other Income	8,536.26 0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Month 4 Gross wages, salary, tips Income from business Rents and real property income Interest, dividends Pension, retirement Contributions to HH Exp Unemployment Other Income	5,690.84 0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0
Month 5 Gross wages, salary, tips Income from business Rents and real property income Interest, dividends Pension, retirement Contributions to HH Exp Unemployment Other Income	5,690.84 0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Month 6 Gross wages, salary, tips Income from business Rents and real property income Interest, dividends Pension, retirement Contributions to HH Exp Unemployment Other Income	5,690.84 0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0

Additional Items as Designated, if any

Remarks

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